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REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
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Application Number	10/715,350	
Filing Date	November 14, 2003	
First Named Inventor	Matthew T. BOGOSIAN	
Art Unit	3712	
Examiner Name	MICHAEL W. ONEILL	
Attorney Docket Number	ARENP001	

To: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450											
Please withdraw me as attorney or agent for the above identified patent application, and											
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the attorneys/agents (with registration numbers) listed on the attached paper(s), or											
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NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.											
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1. The correspondence address is NOT affected by this withdrawal.  2. Change the correspondence address and direct all future correspondence to:											
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	m <i>or</i> lividual Name	Arena Unlimited, Inc.									
Address		21C Orinda Way #181									
			_						_		
City		Orinda	State	CA	Zip 94563				94563		
Country		USA									
Telephone						Fax					
Signature	Mul	authita									
Name	ame Michael J. Ritter							36,653	36,653		
Date	April 1, 2005	005			Telephone No. (408) 446-8690			16-8690			
NOTE: Withdr	awal is effective w	hen approved rather than when received. Un	less there a			etween	approva	al of withd	rawal and the expiration		

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